

| POSITION                  | INITIALS | ID NO. | DATE      |
|---------------------------|----------|--------|-----------|
| FEE DETERMINATION         |          |        |           |
| O.I.P.E. CLASSIFIER       |          | 12     | 2/15      |
| FORMALITY REVIEW          | lit      | 905    | 6-3-13/01 |
| RESPONSE FORMALITY REVIEW | lit      | 907    | 6-8-01    |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date     |
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| Final    |          |
| Original |          |
| 1        | 04/03/01 |
| 2        | 04/03/01 |
| 3        | 04/03/01 |
| 4        | 04/03/01 |
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| Claim    | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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